



Division of Aging Services

State Review Guide

for

Chore Service

HCBS 312

PSA/County: _____ **Site:** _____

Reviewer: _____ **Date:** _____

August 5, 2004

Review Guide Purpose, Service Definitions and Abbreviations/Acronyms

Purpose and Scope:

This guide is designed to assist the Area Agencies on Aging and the Division of Aging Services to measure the compliance and performance of subcontractors for Chore Services for HCBS.

Definition:

Area Agencies may contract for the provision of chore services only with private non-profit organizations or commercial businesses which have the capacity to perform the tasks necessary to improve residential environments and increase the safety and independence of frail community-dwelling elders.

If an Area Agency provides the service directly, the agency must be licensed according to the same rules and regulations and will be subject to being monitored by DAS using this review guide.

Abbreviations and Acronyms (Peculiar to this guide/Service/Program):

AAA	Area Agency on Aging
ADL	Activities of Daily Living
DON-R	Determination of Need - Revised
DAS	Division of Aging Services
DHR	Department of Human Resources
FN	Footnote
IADL	Instrumental Activities of Daily Living
UCM	Uniform Cost Methodology

Number	Section Cited	Compliance Statement	Yes/ No/ N/A Comments
1.	312.2	<p>Scope: The AAA has executed a contract with the provider agency specifically for the provision of chore services.</p> <p><i>Monitor-Review current contract between AAA and provider.</i></p>	<p>Yes ___ No ___ N/A ___</p> <p>Comments:</p>
2	312.3 and 312.9	<p>Service Provider Eligibility: The subcontractor holds a business license in accordance with the rules and regulations of the state. (Also applies to a AAA which provides the service directly)</p> <p><i>Monitor – verify that the agency’s license is current.</i></p>	<p>Yes ___ No ___ N/A ___</p> <p>Comments:</p>
3.	312.4	<p>Target Group: The subcontractor serves persons age 60 and above who are functionally impaired in their abilities to perform activities of daily living.</p> <p><i>Monitor-Review AIMS data for clients’ age and impairment levels. (Reports available, DON-R scores and ADL/IADL counts?)</i></p>	<p>Yes ___ No ___ N/A ___</p> <p>Comments:</p>

Number	Section Cited	Compliance Statement	Yes/ No/ N/A Comments
4.	312.5 (b)	<p><u>Client Eligibility:</u></p> <p>(1) The subcontractor is serving only those persons whose needs it can meet adequately in their places of residences and not in settings where the provision of personal care is included in the cost of service (i.e. personal care or nursing homes).</p> <p>Eligible individuals will meet the following criteria;</p> <ol style="list-style-type: none"> 1.) Age 60 and over 2.) Have at least a moderate degree of physical and/or mental disability or disorder which restricts their ability to perform basic activities of daily living, or which threatens their capacity to live independently. 3.) Do not have sufficient access to persons willing and/or able to assist with or perform the activities of daily living to enable the individual to continue to live safely and independently. 4.) Chore services may be provided to persons participating in the Title-III National Family Caregivers Support Program as a supplemental service, using the eligibility criteria for that program. <p>Chore Services may be provided to persons residing in rental housing after a determination is made that the tasks to be performed are not the responsibility of a landlord, rental management company, or public housing authority, according to a valid lease agreement.</p>	<p>Yes ___ No ___ N/A ___</p> <p>Comments:</p>
5.	312.6	<p><u>Access to Services:</u> Clients or their representatives may request services through the Area Agency, or may be referred to the AAA other social service agencies, community organizations, business and/or health care providers.</p>	<p>Yes ___ No ___</p> <p>Comment:</p>

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7.	312.8	<p><u>Service Outcomes:</u> Service providers shall ensure that their services achieve the following outcomes:</p> <p>a.) Quality chore services are provided at a reasonable cost.</p> <p>b.) Service planning and delivery reflects staff’s awareness of and understanding of client’s personal preferences for maintaining their home and surroundings, balanced with need for intervention to improve their safety in and around their residences.</p> <p>c.) Services are designed to improve the safety of the client’s interior and exterior environments.</p> <p>d.) Services provided are based on a plan individualized for each client’s (and caregiver when present) needs, in the manner and time promised.</p> <p>e.) The provider is able to expand service capacity and improve quality with additional revenue generated through voluntary contributions and clients cost share, when applicable.</p>	<p>Yes _____ No _____</p> <p>a) Yes _____ No _____</p> <p>b) Yes _____ No _____</p> <p>c) Yes _____ No _____</p> <p>d) Yes _____ No _____</p> <p>e) Yes _____ No _____</p> <p>Comments:</p>
8.	312.10(a)	<p><u>Assessment:</u> Depending on the option exercised for conducting client assessment¹, AAA staff, staff of a care management agency, or provider agency staff determines those one-time, seasonal or occasional activities that are indicated to improve the client’s safety and ability to remain in his/her residence.</p> <p><i>Monitor: (1) Review assessment dates in AIMS for documentation of annual (or more frequent) assessments; compare to documentation in client files.</i></p> <p><i>(2) Review assessment forms and formats to determine that DAS-required or approved instruments are used.</i></p> <p><i>(3) Review for documentation of involvement of the chore care worker in the reassessment process.</i></p>	<p>Yes ___ No ___ N/A ___</p> <p>Comments:</p>

¹ In addition to using the DON-R to determine the client’s functional impairment level, the assessor will use the “Home Safety Checklist” in CHAT, or complete a paper copy for the client file. The checklist content may be found in Appendix 312-A.

Number	Section Cited	Compliance Statement	Yes/ No/ N/A Comments
9.	312.10(b) (1)	<p><u>Service plan (Re: FN #5):</u> Designated staff begin developing the service plans, using a format provided or approved by DAS, with the client and/or family during the in-home assessment visit. The plans, at a minimum, include:</p> <p>(A) information, which clearly links the services to be provided with the functional impairments of the client, rendering him/her incapable of adequately maintaining the home and its surroundings in safe and sanitary condition.</p> <p>(B) types of service required/tasks requested or indicated and tasks to be performed;</p> <p>(C) the expected schedule of services, including times and frequency of visits to the client's residence, and the estimated duration of the need for service.</p> <p><i>Monitor - Review client files to determine which services clients are receiving to determine whether plans address required components.</i></p>	<p>Yes ___ No ___ N/A ___</p> <p>Comments:</p>
10.	312.10(b) 2	<p>If chore services are to be provided on an ongoing, intermittent basis, the service supervisor / case manager shall complete the service plan within seven working days after services initially are provided in the residence. Plans are to be revised as necessary, and reviewed and updated by staff members involved in serving the client.</p> <p><i>Monitor- review client files to determine if the seven-day rule was followed, and to make sure plans are updated as needed.</i></p>	<p>Yes ___ No ___ N/A ___</p> <p>Comments:</p>
11.	312.10(c) 2	<p>1). Service initiation: The provider agency has the discretion to begin basic services in the home prior to the completion of the initial service plan, in situations in which the provision of services will immediately improve the safety of the client's home and person.</p> <p>2). The agency initiates services within ten working days from the date of receiving the referral, and thereafter delivers them on a regular basis in accordance with the established service plan.</p> <p><i>Monitor-Review service logs. Also, review client files to determine that services begin within 10 days of receipt of referral and are provided as ordered by the plan.</i></p>	<p>1) Yes ___ No ___ N/A ___</p> <p>Comments:</p> <p>2) Yes ___ No ___ N/A ___</p> <p>Comments:</p>

Number	Section Cited	Compliance Statement	Yes/ No/ N/A Comments
12.	312.10(c) 3	<p>The provider agency makes telephone or other contact within the first four weeks of service initiation to ensure client satisfaction, and annually thereafter for the duration of the service relationship.</p> <p><i>Monitor –Review client files for documentation of 4-week initial follow-up and request a copy of the provider’s client satisfaction form utilized when making these phone calls.</i></p>	<p>Yes ____ No ____ N/A ____</p> <p>Comments:</p>
13.	312.10(d)	<p><u>Supervisory/Monitoring visits:</u> If chore services are provided on an ongoing basis, the appropriate provider agency supervisory or management staff shall make visits to each clients residence, starting from the date of initial service in a residence to ensure that the client (and/or caregiver’s if present needs are met. The visit shall include an assessment of the general condition of the residence, any problems, noted, and the client’s/caregiver’s satisfaction with services.</p> <p><i>Monitor-Check the date of initial service to ensure the client’s needs are met.</i></p>	<p>Yes ____ No ____ N/A ____</p> <p>Comments:</p>
14.	312.10(e)	<p><u>Reassessment:</u> occurs on an on-going or intermittent basis, for each client who receives Chore services-the reassessment is at least annually, or more frequently, based on changes in the client’s functional status or other conditions.</p> <p><i>Monitor-Review assessment dates in AIMS for documentation of annual (or more frequent); compare to documentation in client files.</i></p> <p><i>Review assessment forms and formats to determine that DAS-required or approved instruments are used.</i></p> <p><i>Review for documentation of involvement of chore staff in the reassessment process (reports/noted changes).</i></p>	<p>Yes ____ No ____ N/A ____</p> <p>Comments:</p>

Number	Section Cited	Compliance Statement	Yes/ No/ N/A Comments
15.	312.10(f) 3	<p>A written notice of termination occurred at least 21 calendar days prior to the date of discharge.</p> <p>The provider agency shall discontinue services:</p> <ul style="list-style-type: none"> a) upon death of the client or his/her entry into a personal care home or nursing home, or when there is no longer a need for the service. b) When the client (or caregiver) is non-compliant with the plan of care. c) When the client (or others in the home) threatens the chore services care worker or other agency staff to the extent that the staff's welfare and safety are at risk and all attempts at corrective action have failed. d) When the provider agency resources are not adequate to meet the needs of the client. e) Upon the request of the client or responsible party. <p>The provider agency shall provide written notice of termination and discharge at least 21 calendar days prior to the date of discharge, when applicable.</p> <p><i>Monitor-Review AIMS data on discharges/terminations for this provider and related client files for documentation of timely written notices.</i></p>	<p>Yes ___ No ___ N/A___</p> <p>Comments:</p>
16.	312.11	<p>Staffing: Provider has documentation of appropriate staff and supervision as required by the Department of Human Resources, the Division of Aging , and other s as required by law.</p> <p>Qualifications: Staff who perform chore services shall:</p> <ul style="list-style-type: none"> (1) have a basic ability for oral and/ or written communications, as appropriate for the chore service to be performed, as evidenced by the possession of a high school diploma,, or GED, or demonstrated ability to follow oral instructions to complete assigned tasks 	<p>Yes ___ No ___ N/A___</p> <p>Comments:</p> <p>(1)Yes ___ No ___ N/A___</p>

Number	Section Cited	Compliance Statement	Yes/ No/ N/A Comments
		<p>assigned tasks.</p> <p>(2) have no evidence of criminal conviction for any kind of offense which would have a direct bearing on the individual's fitness to provide chore services, as evidenced by the successful completion of a criminal history records check.</p> <p>(3) have no infectious or contagious disease and be physically capable of performing the service, as evidenced by a physician's statement or other documentation such as self declaration of health history and status;</p> <p>(4) Practice confidentiality by agreeing to refrain from discussing any information pertaining to clients with anyone not directly involved with service delivery.</p> <p><i>Monitor-Review provider's administrative files for documentation of staff qualifications, per item (a)-(c).</i></p>	<p>(2) Yes ___ No ___ N/A ___</p> <p>(3) Yes ___ No ___ N/A ___</p> <p>(4) Yes ___ No ___ N/A ___</p> <p>Comments:</p>
17.	312.11 (b)	<p><u>Specific competencies include:</u></p> <p>1) the ability to use tools and equipment necessary to complete minor home maintenance, for such tasks as snow removal, walkway maintenance, or painting;</p> <p>2) the ability to follow manufacturers' instructions for and use of basic household tools, appliances and equipment needed to complete maintenance or cleaning tasks, such as cleaning, carpet or floor care, garbage removal, moving furniture for seasonal cleaning or safety reasons.</p>	<p>1) Yes ___ No ___ N/A ___</p> <p>Comments:</p> <p>2) Yes ___ No ___ N/A ___</p> <p>Comments:</p>

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18.	312.12(a) 1	<p><u>Orientation and training requirement:</u> Direct services are provided by personnel who are competent to perform the services. Social service agencies and community organizations should provide and orientation for personnel to their job responsibilities including, but not limited to:</p> <ul style="list-style-type: none"> 1) agency policies and procedures 2) philosophy and values of community integration and consumer-driven care 3) recognizing changes in caregiver and clients' conditions indicating the need for emergency procedures or health services 4) agency code of ethics and employee conduct 5) client rights and responsibilities 6) the agencies complaint and handling process 7) process for reporting client progress and problems to supervisory staff, including suspected cases of abuse, neglect or exploitation. 8) The employee's obligation to inform the employer of known exposure to tuberculosis and hepatitis, or any other communicable disease. maintenance of documentation to demonstrate that an individual is able to perform the services for which s/he is responsible <p><i>Monitor-Review orientation and training logs and personnel files.</i></p>	<p>Yes ____ No ____ N/A ____ Comments:</p>
19.	312.13	<p><u>Administrative requirements:</u></p> <ul style="list-style-type: none"> (a) The agency has written policies and procedures which defines the scope of the services provides and the type of clients to be served. (b) The Provider maintains accurate administrative, fiscal, personnel, and client case records that are accessible and available to authorized representatives of all regulatory agencies as required by law. 	<p>a) Yes ____ No ____ N/A ____ Comments:</p> <p>b) Yes ____ No ____ N/A ____ Comments:</p>

Number	Section Cited	Compliance Statement	Yes/ No/ N/A Comments
		<p>(c) The agency has documentation that all employees have been screened through the state criminal records inspection process.</p> <p><i>Monitor – Review agency record keeping systems (paper and electronic) to determine whether all records, including financial and personnel, are accurate, current.</i></p>	<p>c) Yes ___ No ___ N/A ___</p> <p>Comments:</p>
20.	312.13 (d)	<p><u>Service agreements:</u> The Provider contracts for or provides only chore services that it can reasonably expect to deliver.</p> <ul style="list-style-type: none"> a. Date of referral (date on which the provider received the specific referral from the AAA to provide chore services to a client and/or care giver); b. Date the provider made initial contact with the client or caregiver for services; c. Description of services/activities needed, as stated by client/caregiver; d. Description of the services to be provided, staff to be assigned, and expected days, duration and frequency of services. e. Agency charges for services rendered (if applicable), and whether the charges will be paid in full or in part by the client or family; methods of billing and payment; f. Any special arrangements required for providing supplies, equipment, g. Information about the client’s/family’s opportunity to contribute voluntarily toward the cost of services; h. Caregiver’s/client’s acknowledge of receipt of “Client’s Rights and Responsibilities” written notification. i. A telephone number for the provider which the client/caregiver can call for information, to ask questions, or to file complaints about the services supplied by the provider and information regarding supervision by the agency of the services to be provided; <p><i>Monitor - request a copy of the provider’s service agreement, to include a copy of the “Clients Rights and Responsibilities” written notification, to verify that Items A. through I. of Section 313.13,d,1 are included and addressed.)</i></p>	<p>Yes ___ No ___ N/A ___</p> <p>Comments:</p>

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21.	312.13(d) 2	<p>a. Providers shall complete service agreements for new clients before or at the time of the delivery of chore services.</p> <p>b. Services are one-time in nature; or, if provided on an intermittent, ongoing basis, not later than seven calendar days after services initially are provided in the residence.</p> <p><i>Monitor-Review client files for documentation of timely completion of service agreements.</i></p>	<p>a) Yes ___ No ___ N/A ___ Comments:</p> <p>b) Yes ___ No ___ N/A ___ Comments:</p>
22.	312.13 (e)	<p>The provider maintains adequate professional liability insurance coverage on all staff.</p> <p><i>Monitor-review insurance policies, certificates of binder, and/or bond coverage for documentation of coverage in force.</i></p>	<p>Yes ___ No ___ N/A ___ Comments:</p>
23.	312.13(f)1 (f) 2	<p>The provider agency supplies employees with identification cards/badges made of permanent materials, carrying the photograph of each employee.</p> <p>Employees turn in badges upon termination of employment.</p> <p><i>Monitor- Review agency policies and procedures for issuance and recovery of employee badges and request to inspect an actual employee badge.</i></p>	<p>Yes ___ No ___ N/A ___ Comments:</p>
24.	312.13(g)	<p>The provider agency shall ensure that no chore worker is a member of the immediate family (Re: FN #13) of the client/caregiver being served by that worker.</p>	<p>Yes ___ No ___ N/A ___ Comments:</p>

Number	Section Cited	Compliance Statement	Yes/ No/ N/A Comments
		<i>Monitor-review agency policies and procedures, which address service delivery to family members of staff.</i>	
25.	312.13.3 (h)	<p>The provider agency has established and enforces a code of ethics and employee conduct, which is distributed to all employees and clients/families.</p> <p><i>Monitor- request a copy the “code of ethics and employee conduct” to verify all items are included and addressed.</i></p>	<p>Yes ___ No ___ N/A ___</p> <p>Comments:</p>
26.	312.13(i) 1	<p><u>Record Keeping:</u></p> <p>The provider maintains separate, individual client files containing all written records pertaining to each client’s service provision.</p> <p>a) Assessment and reassessment documentation, gathered through the use of instruments or inventories specified or approved by the Division of Aging Services;</p> <p>b) Identifying information including the name, address, telephone number of the client/responsible party, if applicable;</p> <p>c) Current service Agreement;</p> <p>d) Current Service Plan;</p> <p>e) Documentation of tasks performed by chore care staff;</p> <p>f) Documentation of findings of home supervisory visits, unless reflected in their service plan;</p> <p>g) Any material reports from or about the client that relate to the services being provided, including items such as progress notes and problems reported by employees of the provider agency; communications with family members or responsible parties, and any other pertinent information.</p>	<p>Yes ___ No ___ N/A ___</p> <p>a) Yes ___ No ___ N/A ___</p> <p>b) Yes ___ No ___ N/A ___</p> <p>c) Yes ___ No ___ N/A ___</p> <p>d) Yes ___ No ___ N/A ___</p> <p>e) Yes ___ No ___ N/A ___</p> <p>f) Yes ___ No ___ N/A ___</p> <p>g) Yes ___ No ___ N/A ___</p>

Number	Section Cited	Compliance Statement	Yes/ No/ N/A Comments
		<p>h) The date of the referral</p> <p>i) Any and all additional information requested or required by the Division.</p> <p><i>Monitor-Review client files for documentation of items (A)-(I)</i></p>	<p>h) Yes ___ No ___ N/A___</p> <p>i) Yes ___ No ___ N/A___</p> <p>Comments:</p>
27.	312.13(i) 2.A	<p><u>Retention and confidentiality of client records:</u></p> <p>The Provider implements written policies and procedures for the maintenance and security of client records, specifying who shall supervise the maintenance of records; who shall have custody of records; to whom records may be released and for what purposes.</p> <p><i>Monitor-request a copy of the written policies and procedures for file and review client notification and service agreement forms for information on disclosure of confidential information.</i></p>	<p>Yes ___ No ___ N/A___</p> <p>Comments:</p>
28.	312.13(i) 2.B	<p>The provider retains client records for six years from the date of the last service provided.</p> <p><i>Monitor-Review policies and procedures and provider's files for retention of previous five (fiscal) years' records.</i></p>	<p>Yes ___ No ___ N/A___</p> <p>Comments:</p>
29.	312.13(i) 3	<p><u>Personnel records:</u> The provider maintains separate written records for each employee.</p> <p>a) Identifying information: name, address, telephone number, emergency contact person (s);</p> <p>b) Employment history for previous five years or complete history if the person has not been employed for five years;</p>	<p>Yes ___ No ___ N/A___</p> <p>a) Yes ___ No ___ N/A___</p> <p>b) Yes ___ No ___ N/A___</p>

Number	Section Cited	Compliance Statement	Yes/ No/ N/A Comments
		<p>c) Document of qualifications; d) Date of employment; e) Individual job descriptions or statements of persons' duties and responsibilities; f) Documentation of completion of orientation and training requirements. g) Documentation of an annual performance evaluation, at a minimum.</p> <p><i>Monitor-Review personnel files for documentation of items (A)-(G), with particular emphasis on B, C, D, F, and G.</i></p>	<p>c) Yes ___ No ___ N/A ___ d) Yes ___ No ___ N/A ___ e) Yes ___ No ___ N/A ___ f) Yes ___ No ___ N/A ___ g) Yes ___ No ___ N/A ___</p> <p>Comments:</p>
30.	312.13(j) 4	<p><u>Reports of complaints and incidents:</u> The provider maintains:</p> <p>(A) files of all documentation of complaints submitted in accordance with Rules and Regulations of the State of Georgia;</p> <p><i>Monitor-review the complaint file.</i></p> <p>(B) all incident reports or reports of unusual occurrences (falls, accidents, etc.) that affect the health, safety and welfare of the clients, for a minimum of five years;</p> <p><i>Monitor should request the file to review.</i></p> <p>(C) documentation of action taken by the provider to resolve clients' complaints and to address any incident reports or unusual occurrences.</p> <p><i>Monitor- review follow-up documentation.</i></p>	<p>A)Yes ___ No___ N/A___ Comments:</p> <p>B)Yes ___ No___ N/A___ Comments:</p> <p>C)Yes ___ No___ N/A___ Comments:</p>

Number	Section Cited	Compliance Statement	Yes/ No/ N/A Comments
31.	312.14	<p>The agency assures that all Staff complies with agency procedures for reporting suspected abuse, neglect or exploitation to the appropriate law enforcement agency, prosecuting attorney, or county department of family and children services.</p> <p><i>Monitor - request a copy of the written procedures for chore staff to communicate such situations appropriately.</i></p>	<p>Yes ____ No ____ N/A ____ Comments:</p>
32.	312.15	<p>Service Availability – The provider has assessed the need for services outside of core hours and days.</p> <p>If applicable, the provider has developed and implemented plans to address the need for expanded service availability.</p> <p>If applicable, the provider has used the UCM Spreadsheet to calculate different rates for services provided outside of core days and hours</p> <p><i>Monitor:</i></p> <p><i>(1) Request and review documentation of the provider's needs assessment activities.</i></p> <p><i>(2) If applicable, review current year service proposal and UCM spreadsheets (as submitted to AAA) for implementation plans and cost calculations.</i></p>	<p>Yes ____ No ____ N/A ____ Comments:</p> <p>Yes ____ No ____ N/A ____ Comments:</p> <p>Yes ____ No ____ N/A ____ Comments:</p>
33.	312.16	<p>Provider Quality Assurance and Program Evaluation.</p> <p>(a) The Area Agency on Aging will assist each provider of chore services in evaluating the effectiveness of the program at least annually.</p>	

Number	Section Cited	Compliance Statement	Yes/ No/ N/A Comments
		<p>(b) The process shall include, but not be limited to:</p> <ul style="list-style-type: none"> (1) A review of the existing program's operations (2) Satisfaction survey results from participants and their families (when involved), and job satisfaction survey results from staff. (3) An assessment of achievement of client outcomes; (4) Program modifications made that responded to changing needs of participants and staff. (5) Proposed program and administrative improvements. <p><i>Monitor - request a copy of the provider's evaluation process and findings.</i></p>	<p>1) Yes ___ No ___ N/A ___ Comments:</p> <p>2) Yes ___ No ___ N/A ___ Comments:</p> <p>3) Yes ___ No ___ N/A ___ Comments:</p> <p>4) Yes ___ No ___ N/A ___ Comments:</p> <p>5) Yes ___ No ___ N/A ___ Comments:</p>
34.	312.18	<p>The Area Agency on Aging and the Division of Aging Services periodically will monitor and evaluate chore service program performance to determine the degree to which defined program outcomes and objectives, and individual outcomes, have been or are being accomplished.</p> <p><i>Monitor-request a copy of evaluations of the providers chore services program</i></p>	<p>Yes ___ No ___ N/A ___ Comments:</p>